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PTO/SB/05 (03-01)

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Approved for use through 10/31/2002. OMB 0651-0032

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11 TILITY

11-46 U.S. 2908

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 01-46 US

First Inventor Daina Z. Avizoni
Title MEASUREMENTS

(Only for new nonprovisi	ional applications under 37 CFR 1.53(b))	Express	Mail Label No.	EL 541	475 860				
	ATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application						
	ncerning utility patent application conten	ts.							
1. V. See Transmittal (Abbitta or eighted and tability an	Form (e.g., PTO/SB/17) ad aphleate fir for processing) small entity status. 7. Int set form below, or of the invention or to the late of the processing of the invention or to the late of the late	7	Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a Computer Readable Form (CRF) b. Specification Sequence Listing on: i CD-ROM or CD-R (2 copies); or ii paper c Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9 Assignment Papers (cover sheet & document(s)) 10 (when there is an assignee) Attorney 11 English Translation Document (if applicable) 12 Information Disclosure Copies of IDS statement (IDS)/PTO-1449 13 Preliminary Amendment 14 Regulary Amendment 14 (Should be specifically itemized) 15 (riffed Copy of Priority Document(s) (if foreign priority is claimized) 16 (Napublication Request under 35 U.S.C. 122 (b)(2)(B)(0). Applicant must attach form PTO/SB/35 or its equivalent.						
Prior application information:	Examiner:		Group Art I	nit-					
	For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and a pixel be sheeby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
	19. CORRESPON	DENCE ADDRE	ESS						
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Name	2369	3							
	PATENT TRADEHARK	OFFICE							
Address	THEN INDENNA	WI INC.							
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Name (Print/Type)	Bella Fishman	Registro	ation No. (Attorr	ney/Agent)	37,485				
Signature	Bella Tilluca	e e		Date	02/22/02				
urden Hour Statement: This form	in cotimated to take 0.2 hours to several to 7	Taran 1981							

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the reds of the Individual case, Any comments on the amount of time you are required to complete this form should be sent to the Chiff Information (Direct, U.S. Peatent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTOSSG17 (10-01)
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FEE TRANSMITTAL for FY 2002

IT OF P	AVMENT	(\$)	780.00

Complete if Known						
Application Number						
Filing Date	02/22/2002					
First Named Inventor	Daina Z. Avizonis					
Examiner Name						
Group Art Unit						
Attana Destruction	01.46 US					

METHOD OF PAYMENT					FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge				3. ADDITIONAL FEES								
	indicated fees and credit any overpayments to:				1	Large Small						
	Acco Numi				50-0895		Fee	Entit	y Fee	Entit	•	Fee Paid
	Depo	sit [===	Code			e (\$)	Fee Description	ree Paid
,	Nam	unt			Varian, Inc.		105	130	205	65	Surcharge - late filing fee or oath	-
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17				127	50	227	25	Surcharge - late provisional filing fee or cover sheet				
	П				Il entity status		139	130	139	130	Non-English specification	
	=		7 CFR				147	2,520	147	2,520	For filling a request for ex parte reexamination	-
2. Payment Enclosed: Check Credit card Order Other				112	920*	112	920*	Requesting publication of SIR prior to Examiner action				
	_		F	EE (CALCULATION		113	1,840*	113	1,840	Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE				115	110	215	55	Extension for reply within first month	-			
Large Entity Small Entity				116	400	216	200	Extension for reply within second month	——			
		Fee (\$)		Fee le (\$)	Fee Description	Fee Paid	117	920	217	460	Extension for reply within third month	
	101	740	201	370	Utility filing fee	740	118	1,440	218	720	Extension for reply within fourth month	
	106	330	206	165	Design filing fee	- /10	128	1,960	228	980	Extension for reply within fifth month	
	107	510	207	255	Plant filing fee		119	320	219	160	Notice of Appeal	
	108	740	208	370	Reissue filing fee		120	320	220	160	Filing a brief in support of an appeal	
	114	160	214	80	Provisional filing fee		121	280	221	140	Request for oral hearing	
						740	138	1,510	138	,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 740				140	110	240	55	Petition to revive - unavoidable				
2. E	EXT	RA (CLAI	MFE	ES Fee fr		141	1,280	241	640	Petition to revive - unintentional	
				-	Extra Claims belo	w Fee Paid	142	1,280	242	640	Utility issue fee (or reissue)	
Total Claims 10 -20** = 0 × 18 =				143	460	243	230	Design issue fee				
Independent 2 -3** = 0 × 84 =		4 - 9	144	620	244	310	Plant issue fee	<u> </u>				
Multi	ple L	epen	dent		<u> </u>	┚╣	122	130	122	130	Petitions to the Commissioner	<u> </u>
							123	50	123	50	Processing fee under 37 CFR 1.17(q)	
			Smal Fee	Fee	Fee Description		126	180	126	180	Submission of Information Disclosure Stmt	
10	ode 3		Code 203	(\$) 9	Claims in excess of 20		581	40	581	40	Recording each patent assignment per property (times number of properties)	40
10	2	84	202	42	Independent claims in e	xcess of 3	146	740	246	370	Filing a submission after final rejection	1 11
10	4 2	80	204 1	140	Multiple dependent clair	n, if not paid	١				(37 CFR § 1.129(a))	
10	19	84	209	42	** Reissue independent over original patent	claims	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	<u> </u>
110 18		18	210	9	** Reissue claims in exc		179	740	279	370	Request for Continued Examination (RCE)	
			and over original patent		169		169	900	Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 0						0	Other	fee (sp	ecify		<u>, </u>	
**or number previously paid, if greater, For Reissues, see above						s, see above	*Redu	oed by	Basi	Filing	Fee Paid SUBTOTAL (3) (\$)	40

SUBMITTED BY Name (Print/Type) Bella, Fiskan Telephone 650.424.5086 Fluar 37,485 Signature 02/22/2002

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